

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American Society of Anesthesiologists Political Action Committee

Full Name (Last, First, Middle Initial)

A. C. Lee Parmley M.D.Mailing Address Vanderbilt University Medical Cent
1161 21st Avenue South

City	State	Zip Code
Nashville	TN	37232

FEC ID number of contributing
federal political committee.

C

Name of Employer
Vanderbilt UniversityOccupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	20	/	2015

Transaction ID : C3078679

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Jennifer M. Parod M.D.

Mailing Address 4742 N Courtney Dr

City	State	Zip Code
Tucson	AZ	85705-4822

FEC ID number of contributing
federal political committee.

C

Name of Employer
University of Arizona Department of AnOccupation
Assistant Professor of Anesthesiology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	20	/	2015

Transaction ID : C3077362

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Srikanth S. Patankar M.D.

Mailing Address 124 Lincoln Rd.

City	State	Zip Code
Westfield	NJ	07090-3902

FEC ID number of contributing
federal political committee.

C

Name of Employer
New Jersey Anesthesia AssociatesOccupation
anesthesiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	20	/	2015

Transaction ID : C3078346

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

2000.00

TOTAL This Period (last page this line number only)..... ►